

# Center Fire Drill Log

Please Write Clearly

Center Name \_\_\_\_\_

Center Address \_\_\_\_\_

Log					
Date & Day of Week	Time	# of Children Present	Length of Time to Evacuate	Name of Supervising Person	Problems or Comments
____/____/____ Day:					
____/____/____ Day:					
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____/____/____ Day:					

This form is provided as a technical assistance suggestion only. Providers are not required to use this form.

# Center Disaster Drill Log

Please Write Clearly

Center Name \_\_\_\_\_

Center Address \_\_\_\_\_

## Log

Type of Drill:

Date & Day of Week	Time	# of Children Present	Length of Time to Evacuate	Name of Supervising Person	Problems or Comments
____/____/____ Day:					

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Date & Day of Week	Time	# of Children Present	Length of Time to Evacuate	Name of Supervising Person	Problems or Comments
____/____/____ Day:					

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____/____/____ Day:					

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